



2014 Arbor Day Grant Program "PLANTING IDAHO"

Accomplishment Report

GRANTEE COMMUNITY: _____

CONTACT PERSON: _____

PHONE: _____ Email: _____

1. What was the actual date of your Arbor Day Celebration?

2. Please give a breakdown of all cash expenditures **paid by city/county** that you are seeking reimbursement for (**this section total is not to exceed \$300**). Add additional expenses (over the \$300) to **section b**.

Only costs of trees, shrubs & materials related to planting or tree care (i.e. mulch) are eligible for reimbursement.

(Also, enclose paid receipts for these reimbursable expenses.)

Product (to be reimbursed)	Quantity	\$ Amount	Check Number (that City/County paid expense with)
TOTAL (a) \$300 maximum	-----	\$	-----



3. Please list in this section all **additional expenditures** (beyond the \$300 grant dollars) paid by city/county **plus** the amount and value of all donated items for your celebration. Include donated plant material, supplies, equipment and labor. (Labor includes staff/volunteer time at planning meetings, site preparation and planting.) Indicate with an "X" whether donated or paid by city/county. **Be sure you have records on file to substantiate your minimum 25% match. The amount of \$75.00 in cash and/or in-kind donations is required if you receive the full \$300 grant.**



Description of Activity and/or Product	Quantity (# of hours or product)	Value \$ (in dollar amount)	Donated items or labor	Paid by City/County
			Mark appropriate column with an X	
TOTAL (section b)	-----	\$	-----	-----

TOTAL VALUE OF PROJECT (combine a & b from above)

\$

4. How many people were involved in your celebration? _____
5. a. How many and what kind(s) of tree(s) did you plant?
(Make sure the cost of these trees is shown in the cost accounting sections on page 1.)
- b. Were any overhead utilities in the vicinity? _____

Number of Trees?	Types of Trees?

6. Who has the responsibility to water and care for the tree(s)?

7. Provide a brief description of your celebration. Please send any photos, newspaper clippings, handouts or other material you used in your Arbor Day celebration. Your celebration may be highlighted in either the INLA "Taproot" newsletter or in the "Idaho Community Trees" newsletter.

Signature of Authorized Community Official:

Thanks for participating and *KEEP PLANTING IDAHO!*

Please return this form and all attachments to:

Ann Bates – Executive Director
Idaho Nursery and Landscape Association
P. O. Box 2065
Idaho Falls, Idaho 83403
Phone: 208-681-4769
Fax: 208-529-0832
or scan and email to:
abates@inlagrow.org

To be reimbursed this form must be submitted to INLA

prior to June 30, 2014

Failure to do so will result in *forfeiture* of grant reimbursement.

